

Department of Social and Health Services

**DP Code/Title: M2-ED Abuse Prevention (HSQB)**

**Program Level - 050 Long Term Care Services**

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Budget Period: 2003-05    Version: 11    2003-05 Agency Request Budget

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**Recommendation Summary Text:**

The Aging and Adult Services Administration (AASA) requests funding to provide match to a Centers for Medicare and Medicaid Services (CMS) federal grant which provides funding to assist the State in meeting federal guidelines for timeliness of nursing home complaint investigations.

**Fiscal Detail:**

**Operating Expenditures**

	<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
<b>Program 050</b>			
001-1 General Fund - Basic Account-State	397,000	397,000	794,000
001-2 General Fund - Basic Account-Federal	564,000	564,000	1,128,000
001-C General Fund - Basic Account-DSHS Medicaid Federa	208,000	208,000	416,000
<b>Total Cost</b>	<b>1,169,000</b>	<b>1,169,000</b>	<b>2,338,000</b>

**Staffing**

	<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Annual Avg</u></b>
<b>Program 050 FTEs</b>	<b>14.0</b>	<b>14.0</b>	<b>14.0</b>

**Package Description:**

The CMS has mandated that complaints alleging actual harm in nursing homes be investigated within 10 working days. CMS has provided federal funding for a staff increase to accomplish this requirement. These federal dollars require state matching funds. The state budget currently does not reflect the authority to accept these federal funds, nor provide the state share and FTEs necessary for these requirements.

On a national and state level, elder abuse is an increasingly prominent and visible policy issue. Section 1864 of the Social Security Act, the agreement by which the federal government contracts with state agencies to conduct nursing home survey and certification related activities for Medicare and Medicaid, provides instruction to states as to how survey and certification activities are to occur. As part of the Section 1864 agreement, the CMS has mandated that complaints alleging harm to residents in nursing homes must be investigated in the nursing home within 10 working days of the receipt of the complaint. Washington State continues to have difficulty meeting this directive, largely due to a continued increase in volume of complaints, increased federal enforcement activity, and limited staffing.

A governor-requested study, addressing protection of vulnerable adults in Washington State found that, "Frequently, surveyors must become complaint investigators in order to keep up with required or desired response times (Surveyors normally have not received investigator training). The number of available complaint investigators are perceived by many to be inadequate," (study submitted by Riveland Associates, August 2000). In addition to this evaluation, the federal General Accounting Office (GAO) conducted a repeat on-site evaluation of Washington State's complaint investigation timeliness in the spring of 2000. Results of this evaluation were reported to the Congressional Special Committee on Aging in September 2000. In the GAO's report, Washington State was only able to meet federal timeliness requirements for on-site complaint investigation 75 percent of the time.

Failure to meet the Section 1864 requirements risks loss of Federal Financial Participation. Within existing federal statute, CMS has the ability to sanction states. Potential sanctions for failure to meet the Section 1864 agreement include termination of the agreement, and/or placement of temporary management into the state agency. CMS regional and central office staff continue to actively monitor Washington State and rate performance.

In Federal Fiscal Year 2001, CMS provided funding for AASA to hire 14.0 FTEs to assist AASA in meeting mandates regarding complaint investigations. This decision package is requesting state authority to continue these FTEs and matching

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state funds for abuse investigators/surveyors and resident protection investigators.

**Narrative Justification and Impact Statement**

***How contributes to strategic plan:***

This request directly supports public values of the agency balanced scorecard that "People are Safe from Abuse/Neglect"; that "Services Promote Public Safety"; and, that "Clients Maintain or Improve Their Health."

The agency believes, that the complaint system is the most direct link to the public and consumers for whom the agency is charged with protecting. Washington State conducts more on-site complaint investigations per 1,000 beds than any other state. Two fundamental practices distinguish Washington State's complaint system. First, Washington State widely publicizes the complaint hotline number, and encourages the public to notify the state regarding abuse, neglect, exploitation, and care concerns. Secondly, Washington State has mandatory reporting requirements for nursing homes and staff, both of which must notify the Department of Social and Health Services of all allegations of abuse, neglect, or exploitation of residents. Both of these system features are components that CMS and the GAO have noted as exemplary. However, the success of any complaint system is based on Washington State's ability to employ highly trained and qualified professionals who can prioritize complaints appropriately, and complaint investigators who can respond in a timely manner.

***Performance Measure Detail***

**Program: 050**

**Goal: 02E    Address Client and Family Needs**

**Incremental Changes**

**FY 1**

**FY 2**

No measures submitted for package

***Reason for change:***

Additional investigative staff will result in: 1) increased compliance with federal timeliness requirements; 2) more timely investigation of individuals alleged to have abused, neglected, or exploited residents living in nursing homes; and 3) heightened effectiveness and coordination of complaint investigations.

***Impact on clients and services:***

A functional, responsive complaint system is one of the most critical links to the public. For citizens who believe a vulnerable adult has been abused, neglected, and/or exploited in a nursing home, AASA has a specialized, publicly accessible complaint hotline and intake unit. The Complaint Resolution Unit has established a centralized reporting system, with a 24-hour toll-free telephone number for citizens to report concerns. As public awareness of elder abuse issues increases, coupled with the continued complexity of complaints that have become the "norm," the need for timely evaluation of public concerns is crucial.

***Impact on other state programs:***

None

***Relationship to capital budget:***

None

***Required changes to existing RCW, WAC, contract, or plan:***

None

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***Alternatives explored by agency:***

There are no options, as workload is simply outstripping resources. The complaint system not only receives complaints about alleged abuse (proportionately a small number), but many complaints allege failure to provide care and services. Failure to provide care and services may lead to the conclusion of harm or neglect, but this can only be determined through a professional on-site evaluation of the care and services provided.

***Budget impacts in future biennia:***

All costs are ongoing.

***Distinction between one-time and ongoing costs:***

There are no one-time costs.

***Effects of non-funding:***

Failure to fund this federal mandate would bring potential sanction for failure to meet the Section 1864 agreement including termination of the Section 1864 agreement, and/or placement of temporary management in the state agency. AASA is unable to impose reductions to other work being done due to mandatory survey and certification requirements.

***Expenditure Calculations and Assumptions:***

See attachment - AASA M2-ED Abuse Prevention (HSQB).xls

<b><u>Object Detail</u></b>		<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
<b>Program 050 Objects</b>				
A	Salaries And Wages	852,000	852,000	1,704,000
B	Employee Benefits	164,000	164,000	328,000
E	Goods And Services	123,000	123,000	246,000
G	Travel	16,000	16,000	32,000
T	Intra-Agency Reimbursements	14,000	14,000	28,000
<b>Total Objects</b>		<b>1,169,000</b>	<b>1,169,000</b>	<b>2,338,000</b>

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**DSHS Source Code Detail**

<b>Program 050</b>		<b><u>FY 1</u></b>	<b><u>FY 2</u></b>	<b><u>Total</u></b>
<b>Fund 001-1, General Fund - Basic Account-State</b>				
<b><u>Sources</u></b>	<b><u>Title</u></b>			
0011	General Fund State	397,000	397,000	794,000
<i>Total for Fund 001-1</i>		<b>397,000</b>	<b>397,000</b>	<b>794,000</b>
<b>Fund 001-2, General Fund - Basic Account-Federal</b>				
<b><u>Sources</u></b>	<b><u>Title</u></b>			
777G	TXVIII & TXIX Survey & Certification (75%)	564,000	564,000	1,128,000
<i>Total for Fund 001-2</i>		<b>564,000</b>	<b>564,000</b>	<b>1,128,000</b>
<b>Fund 001-C, General Fund - Basic Account-DSHS Medicaid Federa</b>				
<b><u>Sources</u></b>	<b><u>Title</u></b>			
19UL	Title XIX Admin (50%)	208,000	208,000	416,000
<i>Total for Fund 001-C</i>		<b>208,000</b>	<b>208,000</b>	<b>416,000</b>
<b>Total Program 050</b>		<b>1,169,000</b>	<b>1,169,000</b>	<b>2,338,000</b>